

Figure 3-1 Field Corrective Action Form



Corrective and Preventive Action Form

CPA No:	Environmental incident <input type="checkbox"/>	Nonconformity from audits <input type="checkbox"/>	Suggestion for improvement <input type="checkbox"/>	From complaints/notices/external parties <input type="checkbox"/>	Other <input type="checkbox"/>
Category	Document control <input type="checkbox"/>	System failure <input type="checkbox"/>	Wrong instructions <input type="checkbox"/>	Training <input type="checkbox"/>	Contractor fault <input type="checkbox"/> Operator fault <input type="checkbox"/>
Raised by:	Assigned to:		Date:	Remarks:	
Description:					
Proposed immediate action (correction):					
Completed by:		Date:	Remarks:		
Root cause analysis required: Yes <input type="checkbox"/> No <input type="checkbox"/>					
Underlying / root cause:					
Determined by:		Date:	Remarks:		
Proposed action for long term solution (corrective/preventive action):					
Completed by:		Date:	Remarks:		
Comments on effectiveness of action taken:					
Closed out by:		Date:	Remarks:		